								Application or Docket Number					
	PATENT A	APPLICATIO Effect	11701513										
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			10				RAT	E	FEE] [RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE (385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			() minus 20=		*		X\$ 9	=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =				X43			OR	X86=		
MU	LTIPLE DEPEN	IDENT CLAIM PI		·		+145	=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	L.		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMAI	L EN	ITITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO	EST BER DUSLY	PRESENT EXTRA	RATI	≣ Τ	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	$\neg \vdash$		OR	X\$18=		
	Independent	*	Minus	***		=	X43=	=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPE				CLAIM		+145			OR	+290=		
								AL EE			TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)									. '			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER . DUSLY	PRESENT EXTRA	RATE	<u> </u>	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** (= .	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=	X43=			OR	X86=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							\top			+290=		
	•		+145: TOT	_		OR	TOTAL						
		•	ADDIT. F			OR ,	ADDIT. FEE						
		(Column 1)	-	(Column 3)									
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	: TI	ADDI- ONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	X\$ 9=	.		OR	X\$18=		
	Independent	*	Minus	***		=	X43=		·	OR	X86=	_	
	FIRST PRESENTATION OF MULTIPLE DEPE				CLAIM			╅		ı		·-··-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									•	OR ,	TOTAL ADDIT. FEE		
•	The "Highest Num	iber Previously Pai	d For" (Total or	r Independe	ent) is the	highest number f	ound in the	аррго	priate box	in col	umn 1.		